4031191843

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5 FEC MAIL CENTER
LOUICINIYI ITIRIAICI	NITIEINIBIEIRIG IF	BILL ICIONIGIAE	<u> </u>
ADDRESS (number and street)	111212 15 MIP	LIME LANE	
(Check if address is changed)			
	CITY A	A	#
COMMITTEE'S E-MAIL ADDRE	SS		
(Check if address is changed)	Optional Second E-Mail Add) igimai illi Com
	handradonakonakonakonakonak	.	
COMMITTEE'S WEB PAGE AD	OPECC (LIPL)		
(Check if address is changed)	Lilia III	1 1 1 1 1 1 1 1 1 1	
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		<u> </u>	
2. DATE 02 2	0 2014		
3. FEC IDENTIFICATION N	JMBER ▶ C 0	0505396	
4. IS THIS STATEMENT	NEW (N) OR	✓ AMENDED (A)	
I certify that I have examined the	nis Statement and to the hest	of my knowledge and belief i	t is true, correct and complete
Tooling that There examined to			t to trae, correct and complete.
Type or Print Name of Treasure	ELIZABETH	BNONNE	
Signature of Treasurer	Rybeth Brown)	Date 02 20 2014
NOTE: Submission of false, errone		may subject the person signing ON SHOULD BE REPORTED \	this Statement to the penalties of 2 U.S.C. §437g. WITHIN 10 DAYS.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	PPL. PLINIU